

Friends of the Crown Point Library Membership Form		Make Checks payable and Return to: Friends of the CP Library 122 North Main Street Crown Point, IN 46307
<input type="checkbox"/> \$10 Adult Single	<input type="checkbox"/> \$15 Adult Family (2 members)	
<input type="checkbox"/> \$150 New Lifetime Adult	<input type="checkbox"/> Update my contact information	
I would like to make an additional donation of \$ _____ In honor of (optional)		

PLEASE PRINT CLEARLY

I want to volunteer - give me a call !

First Name		Last Name	
If purchasing a \$15 Family Membership, please indicate name for second card			
Address	City	State	Zip Code
Email	Phone		

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